

B 1 (Official Form 1) (1/08)

United States Bankruptcy Court Northern District of Illinois				Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): <b>Ciccone, Ciarra, M.</b>			Name of Joint Debtor (Spouse) (Last, First, Middle): <b>n/a</b>		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>Ciarra Ciccone</b>			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): <b>n/a</b>		
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>xxx-xx-0612</b>			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>n/a</b>		
Street Address of Debtor (No. and Street, City, and State): <b>1431 W. Wolfram Street Chicago, IL</b> <div style="text-align: right;">ZIP CODE <b>60657</b></div>			Street Address of Joint Debtor (No. and Street, City, and State): <b>n/a</b> <div style="text-align: right;">ZIP CODE</div>		
County of Residence or of the Principal Place of Business: <b>Cook</b>			County of Residence or of the Principal Place of Business: <b>n/a</b>		
Mailing Address of Debtor (if different from street address): <b>1431 W. Wolfram Street Chicago, IL</b> <div style="text-align: right;">ZIP CODE <b>60657</b></div>			Mailing Address of Joint Debtor (if different from street address): <b>n/a</b> <div style="text-align: right;">ZIP CODE</div>		
Location of Principal Assets of Business Debtor (if different from street address above): <b>1431 W. Wolfram Street, Chicago, IL</b> <div style="text-align: right;">ZIP CODE <b>60657</b></div>					
<b>Type of Debtor</b> (Form of Organization) (Check one box.)  <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<b>Nature of Business</b> (Check one box.)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <b>Tax-Exempt Entity</b> (Check box, if applicable.)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.)  <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  <b>Nature of Debts</b> (Check one box.)  <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.	
<b>Filing Fee</b> (Check one box.)  <input type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input checked="" type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			<b>Chapter 11 Debtors</b>  Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).  <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.  Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).		
<b>Statistical/Administrative Information</b>  <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					THIS SPACE IS FOR COURT USE ONLY
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000					
<b>Estimated Assets</b> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					
<b>Estimated Liabilities</b> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					

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Page 2

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): <b>Ciarra M. Ciccone</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)			
Location Where Filed: <b>n/a</b>	Case Number: <b>n/a</b>	Date Filed: <b>n/a</b>	
Location Where Filed: <b>n/a</b>	Case Number: <b>n/a</b>	Date Filed: <b>n/a</b>	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)			
Name of Debtor: <b>n/a</b>	Case Number: <b>n/a</b>	Date Filed: <b>n/a</b>	
District: <b>Northern District of Illinois</b>	Relationship: <b>n/a</b>	Judge: <b>n/a</b>	
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b>  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).  <input checked="" type="checkbox"/> _____ Signature of Attorney for Debtor(s) (Date)	
<b>Exhibit C</b>  Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?  <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
<b>Exhibit D</b>  (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)  <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.  If this is a joint petition:  <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box.) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)  <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  <div style="text-align: right; margin-right: 100px;">                     _____                      (Name of landlord that obtained judgment)                 </div> <div style="text-align: right; margin-right: 100px;">                     _____                      (Address of landlord)                 </div> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and  <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.  <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(f))			

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<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): <div style="text-align: center;">Ciarra M. Ciccone</div>
<b>Signatures</b>		
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u>Ciarra M Ciccone</u> Signature of Debtor</p> <p>X _____ Signature of Joint Debtor</p> <p><u>773-742-7727</u> Telephone Number (if not represented by attorney)</p> <p><u>June 2008</u> Date</p>	<p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed Name of Foreign Representative)</p> <p>_____ Date</p>	
<p style="text-align: center;"><b>Signature of Attorney*</b></p> <p>X _____ Signature of Attorney for Debtor(s)</p> <p>_____ Printed Name of Attorney for Debtor(s)</p> <p>_____ Firm Name</p> <p>_____ Address</p> <p>_____ Telephone Number</p> <p>_____ Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;"><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____ Address</p> <p>X _____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</small></p>	
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Authorized Individual</p> <p>_____ Printed Name of Authorized Individual</p> <p>_____ Title of Authorized Individual</p> <p>_____ Date</p>		

B 1D (Official Form 1, Exhibit D) (10/06)

## UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re Ciarra M. Ciccone  
Debtor(s)

Case No. \_\_\_\_\_  
(if known)

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☐ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☒ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

B 1D (Official Form 1, Exh. D) (10/06) - Cont

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]* \_\_\_\_\_

**If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: Ciana M. Ciccone

Date: June 2008

B6J (Official Form 6J) (12/07)

In re Ciarra Ciccone  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ 495.00
a. Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
b. Is property insurance included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
2. Utilities: a. Electricity and heating fuel	\$ 120.00
b. Water and sewer	\$ 0.00
c. Telephone	\$ 40.00
d. Other <u>n/a</u>	\$ 0.00
3. Home maintenance (repairs and upkeep)	\$ 0.00
4. Food	\$ 200.00
5. Clothing	\$ 0.00
6. Laundry and dry cleaning	\$ 0.00
7. Medical and dental expenses	\$ 0.00
8. Transportation (not including car payments)	\$ 80.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ 0.00
10. Charitable contributions	\$ 0.00
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$ 0.00
b. Life	\$ 0.00
c. Health	\$ 0.00
d. Auto	\$ 0.00
e. Other <u>n/a</u>	\$ 0.00
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) <u>n/a</u>	\$ 0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ 0.00
b. Other <u>n/a</u>	\$ 0.00
c. Other <u>n/a</u>	\$ 0.00
14. Alimony, maintenance, and support paid to others	\$ 0.00
15. Payments for support of additional dependents not living at your home	\$ 0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ 0.00
17. Other <u>n/a</u>	\$ 0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	<b>\$ 935.00</b>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$ 0.00
b. Average monthly expenses from Line 18 above	\$ 935.00
c. Monthly net income (a. minus b.)	\$ -935.00

B61 (Official Form 61) (12/07)

In re Ciarra Ciccone,  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Single	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): n/a	AGE(S): n/a
Employment:	DEBTOR	SPOUSE
Occupation	Unemployed	n/a
Name of Employer	n/a	n/a
How long employed	n/a	n/a
Address of Employer	n/a	n/a

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$ 0.00	\$ 0.00
2. Estimate monthly overtime	\$ 0.00	\$ 0.00
3. SUBTOTAL	\$ 0.00	\$ 0.00
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ 0.00	\$ 0.00
b. Insurance	\$ 0.00	\$ 0.00
c. Union dues	\$ 0.00	\$ 0.00
d. Other (Specify): n/a	\$ 0.00	\$ 0.00
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ 0.00	\$ 0.00
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ 0.00	\$ 0.00
7. Regular income from operation of business or profession or farm (Attach detailed statement)	\$ 0.00	\$ 0.00
8. Income from real property	\$ 0.00	\$ 0.00
9. Interest and dividends	\$ 0.00	\$ 0.00
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ 0.00	\$ 0.00
11. Social security or government assistance (Specify): n/a	\$ 0.00	\$ 0.00
12. Pension or retirement income	\$ 0.00	\$ 0.00
13. Other monthly income (Specify): n/a	\$ 0.00	\$ 0.00
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ 0.00	\$ 0.00
15. AVERAGE MONTHLY INCOME (Add amounts on lines 6 and 14)	\$ 0.00	\$ 0.00
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)	\$ 0.00	\$ 0.00
(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)		
17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: n/a		

**SCHEDULE OF CREDITORS**

**Ciarra M. Ciccone**  
SS No: xxx-xx-0612

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**BALLY TOTAL FITNESS**

Acct No: 3220107XXXX  
12440 E IMPERIAL HWY 30  
Norwalk, CA 90650

**ALLIED INTERSTATE COLLECTIONS**

Acct No: 5461XXXX  
3000 Corporate Exchange Drive  
Columbus, OH 43231

**BERGNER'S**

Acct No: 9000000819305XXXX  
140 W Industrial Drive  
Elmhurst, IL 60126

**BP/CITIBANK SD**

Acct No: 471026XXXX  
PO Box 15687  
Wilmington, DE 198505687

**CAPITAL ONE**

Acct No: 41217425XXXX  
PO Box 30281  
Salt Lake City, UT 841300281

**CATHERINE PLUS SIZES**

Acct No: 627800000104XXXX  
1103 Allen Drive  
Milford, OH 45150

**CBUSASEARS**

Acct No: 1740XXXX  
Citi Cards  
8725 W Sahara Ave  
The Lakes, NV 891630001

**CDA/PONTIAC**

Acct No: D00210D0XXXX  
415 E MAIN POB 213  
Streator, IL 61364



**SCHEDULE OF CREDITORS**

**Ciarra M. Ciccone**  
SS No: xxx-xx-0612

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**CITI**

Acct No: 41280032XXXX  
PO Box 6241  
Sioux Falls, SD 57117

**CMRE FINANCE**

Acct No: T710MMBR35086XXXX  
3075 E Imperial Hwy  
Suite 200  
Brea, CA 92821

**CORPORATE COLLECTION SERVICES**

Acct No: 2294XXXX  
23220 Chagrin Suite 400  
Beachwood, OH 44122

**CREDITORS COLLECTION BUREAU**

Acct No: 246XXXX  
755 Almar Parkway Suite C  
Bourbonnais, IL 60914

**CREDITORS COLLECTION BUREAU**

Acct No: 246XXXX  
755 Almar Parkway Suite C  
Bourbonnais, IL 60914

**CREDITORS COLLECTION BUREAU**

Acct No: 241XXXX  
PO Box 63  
151 N. Schuyler Ave  
Kankakee, IL 60901

**CREDITORS COLLECTION BUREAU**

Acct No: 233XXXX  
PO Box 63  
151 N. Schuyler Ave  
Kankakee, IL 60901

**EMERGE/CB&T**

Acct No: 512070000028XXXX  
PO Box 105555  
Atlanta, GA 303485555

**SCHEDULE OF CREDITORS**

**Ciarra M. Ciccone**  
SS No: xxx-xx-0612

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**EMERGE/FNBO**

Acct No: 518189000723XXXX  
PO Box 105555  
Atlanta, GA 30348

**FIRST BANK OF DELAWARE**

Acct No: 520605000070XXXX  
C/O Continental Finance Co  
PO Box 11743  
Wilmington, DE 198501743

**FIRST NATL BANK OF MARIN**

Acct No: 407193018056XXXX  
PO Box 98873  
Las Vegas, NV 891938873

**GEMB/JCP**

Acct No: 133732XXXX  
PO Box 984100  
El Paso, TX 79998

**GEMB/JC PENNEY**

Acct No: 600889133902XXXX  
PO Box 981402  
El Paso, TX 799981402

**HARRIS & HARRIS LTD**

Acct No: 1119XXXX  
600 W Jackson  
Suite 700  
Chicago, IL 60661

**HARRIS & HARRIS LTD**

Acct No: 1182XXXX  
600 W Jackson  
Suite 700  
Chicago, IL 60661

**HARRIS & HARRIS LTD**

Acct No: 1119XXXX  
600 W Jackson  
Suite 700  
Chicago, IL 60661

**SCHEDULE OF CREDITORS**

**Ciarra M. Ciccone**  
SS No: xxx-xx-0612

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**HARRIS & HARRIS LTD**

Acct No: 1117XXXX  
600 W Jackson  
Suite 700  
Chicago, IL 60661

**HOUSEHOLD CREDIT SERVICES**

Acct No: 540801003187XXXX  
PO Box 98706  
Las Vegas, NV 891938706

**HSBC CARSON**

Acct No: 126872XXXX  
PO Box 15524  
Wilmington, DE 198505524

**HSBC NV**

Acct No: 473068014103XXXX  
PO Box 5253  
Carol Stream, IL 60197

**KCA FINANCIAL SERVICE**

Acct No: 939XXXX  
628 North Street  
Geneva, IL 60134

**MACYS/DSNB**

Acct No: 437586037XXXX  
9111 Duke Blvd  
Mason, OH 45040-8999

**MED BUSI BUR**

Acct No: CD634XXXX  
1460 Renaissance Drive  
Suite 400  
Park Ridge, IL 60068

**RNB-FIELDS3**

Acct No: 448947434508XXXX  
PO Box 9475  
Minneapolis, MN 55440

**SCHEDULE OF CREDITORS**

**Ciarra M. Ciccone**  
SS No: xxx-xx-0612

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**STATE FARM BANK**

Acct No: 85267568760XXXX  
3 State Farm Plz N-4  
Attn David Neill  
Bloomington, IL 617910001

**TARGET NATIONAL BANK**

Acct No: 435237505847XXXX  
Mail Stop 2BD  
PO Box 9475  
Minneapolis, MN 55440-9475

**THE AVENUE**

Acct No: 13117XXXX  
PO Box 29185  
Shawnee Mission, KS 662019185

**WFNNB/EXPRESS STRUCT**

Acct No: 38478XXXX  
PO Box 330064  
Northglenn, CO 80233

**WFNNB/LANE BRYANT**

Acct No: 79385XXXX  
4590 E Broad Street  
Columbus, OH 43213

**BLATT HASEN MILLER  
LEIBSKER & MOORE**

Acct No: SS No 555-55-0612  
125 South Wacker Drive  
Suite 400  
Chicago, IL 60606

**NCB MANAGEMENT SERVICES**

Acct No: SS No 555-55-0612  
One Allied Drive  
Trevose, PA 19053

**PELLETTIERI & ASSOCIATES**

Acct No: SS No 555-55-0612  
991 Oak Creek Dr  
Lombard, IL 60148

**SCHEDULE OF CREDITORS**

**Ciarra M. Ciccone**  
SS No: xxx-xx-0612

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**NCO FINANCIAL SYSTEMS, INC.**  
Acct No: SS No 555-55-0612  
507 Prudential Road  
Horsham, PA 19044

**BUREAU COLLECTION**  
Acct No: SS No 555-55-0612  
7575 CORPORATE WAY  
Eden Prairie, MN 55344

**CACH, LLC**  
Acct No: 1399119106120XXXX  
370 17th St Ste 5000  
Denver, CO 802025690

**CMRE FINANCIAL SVCS**  
Acct No: T710MMBR35086XXXX  
3075 E Imperial Hwy  
Brea, CA 92821

**CREDITORS DISCOUNT**  
Acct No: D00210D0XXXX  
415 E Main Street  
Streator, IL 61364

**DEPENDON COLLECTION**  
Acct No: 56304078XXXX  
120 W 22<sup>nd</sup> Street Suite 360  
Oak Brook, IL 60523

**DEPENDON COLLECTION**  
Acct No: 56304092XXXX  
120 W 22<sup>nd</sup> Street Suite 360  
Oak Brook, IL 60523

**ILLINOIS COLLECTION**  
Acct No: 993XXXX  
8231 185<sup>th</sup> Suite 100  
Tinley Park, IL 60487

**SCHEDULE OF CREDITORS**

**Ciarra M. Ciccone**  
SS No: xxx-xx-0612

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**ILLINOIS COLLECTION**

Acct No: 1014XXXX  
8231 185<sup>th</sup> Suite 100  
Tinley Park, IL 60487

**TARGET NATIONAL BANK**

Acct No: IL07M1118806  
PO Box 59231  
Minneapolis, MN 55459-0231

**TARGET FINANCIAL SERVICES**

Acct No: SS No 555-55-0612  
Mail Stop 5C-F  
PO Box 673  
Minneapolis, MN 55440